Linvier the Ro	neowyk Reduction Art of	1995 no person are c	squired to	U.S. Pate	nt and Trade	mark Office, U.S. D.	EPARTMENT O	F COMMERC
Effective on 12/08/2004.				respond to a collection of information unless it displays a valid OMB control number Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818). FEE TRANSMITTAL				Application Number		10/748,389-Conf. #8159		
				Filing Date		December 29, 2003		
For FY 2008				First Named Inventor		Minec Yamakawa		
FOT FT 2008				Examiner Name		P. K. Wright		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		1743		
TOTAL AMOUNT OF PAYMENT (\$) 810.00				Attorney Docket No. 21058/			73-US0	
METHOD OF	PAYMENT (check	all that apply)						
Check	x Credit Card	Money Order	Nor	ne Other	(please ident	ıfy):		
Deposit Ac	COURT Deposit Account	Number: 04	-0100	Deposi	t Account Nam	ne Darby	& Darby P	.c.
	above-identified dep		irector is)	
Пс	harge fee(s) indicate	d below		Char	ge fee(s) in	dicated below.	except for th	e filing fee
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCUI		.16 and 1.1/						
	G. SEARCH, AND E	XAMINATION FE	ES					
FILING FEES SEA						NATION FEES	6	
Application To	ype Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	nie (E)
Utility	310	155	510	255	210	105		and (g)
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	210	233	0	0		
2. EXCESS CLA			•	•		•		Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)							50	25
Each independent claim over 3 (including Reissues)							210	105
Multiple depend	dent claims						370	185
Total Claims Extra Claims Fee (5)		Fee F	e Paid (\$)		Multiple Dependent Claims			
38 .54 - x		x =			Fee (\$)		Fee Paid (\$	1
	ber of total claims paid to				_		_	_
Indep, Claims	Extra Claims	Fee (\$)	Fee F	Paid (\$)				
J HD a biobast our	- 4 = ber of independent claims	naid for if greater the						
3. APPLICATIO		paid io., ii greater die						
	n Size ree ation and drawings e	rceed 100 sheets	of naner	(excluding elect	ronically f	iled sequence o	r commuter	
	ler 37 CFR 1.52(e)),)
sheets or fra	action thereof. See 3	5 U.S.C. 41(a)(1)	(G) and	37 CFR 1.16(s).		•		
Total Sheet			of each a	dditional 50 or fra			Fee F	Paid (\$)
- 100 = /50 = 4. OTHER FEE(S)				(round up to a wh	iole number)	×	F	0-14 (4)
4. OTHER FEE	S)						F865	Paid (\$)
Other (e.g., 1	ate filing surcharge)	: 1801 Request	for cont	inued examina	ation (RCI	E) (see 37	81	0.00
SUBMITTED BY			_			_==		==
Signature	/Raj S. Davé/			Registration No. (Attorney/Agent)	42,465	Telephone	(202) 639-7515	
Name (Print/Type) Raj S. Davé			7.74-1		Date	January 3	0, 2008	